

and
SECURITY ORDER RECOMMENDATION BY DEFENSE AGENCY

Application Serial No.: 10/687,379

Defense Agency: ARMY

Filing Date:

Date Referred: 1-29-04

Date Created: 2/3/04

I hereby acknowledge as indicated by my signature on this form that I have inspected this application in administration of 35 USC 181 on behalf of the Agency/Command specified below. I promise not to divulge any information from this application for any purpose other than administration of 35 USC 181.

Recommendation

(e.g. 'Secrecy Not Recommended (SNR)')

Reviewer(s) Signature/Date/Command

Allen P. Allen SNR
MAR 24 2004 3-25-04
U.S. Army
COMDAN AR/Navy

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Instructions to Reviewers:

All individuals reviewing this application are required under 35 USC 181 to sign and date this form regardless of whether they are making a secrecy order recommendation.

The attached copy of the application, any copies made therefrom and this form must be returned to the TO once a recommendation not to impose secrecy has been made or a secrecy order has been rescinded.

For Completion of Review:

Pursuant to 35 U.S.C. 184, the subject matter of this application may be filed in a foreign country for the purpose of filing a patent application without a license any time after the expiration of 6 months from filing date unless the application becomes the subject of a secrecy order.

This document contains information that is exempt from public release under 35 U.S.C. 184. It is to be controlled, stored, handled, transmitted, and disposed of in accordance with the provisions of 35 U.S.C. 184. This document is to be controlled, stored, handled, transmitted, and disposed of in accordance with the provisions of 35 U.S.C. 184. This document is to be controlled, stored, handled, transmitted, and disposed of in accordance with the provisions of 35 U.S.C. 184.

6-1-04

ACCESS ACKNOWLEDGMENT
and
SECRECY ORDER RECOMMENDATION BY DEFENSE AGENCY

Application Serial No.: 10/687,379

Defense Agency: NAVY

Filing Date: 10/14/03

Date Referred: 1/21/04

I hereby acknowledge as indicated by my signature on this form that I have inspected this application in administration of 35 USC 181 on behalf of the Agency/Command specified below. I promise not to divulge any information from this application for any purpose other than administration of 35 USC 181.

Recommendation

(e.g. 'Secrecy Not Recommended (SNR)')

Reviewer(s) Signature/Date/Command

| | | | |
|-----|---------|---------|------------|
| SNR | 2 McW — | 3/23/04 | ONR |
| | | | |

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Instructions to Reviewers:

1. All individuals reviewing this application are required under 35 USC 181 to sign and date this form regardless of whether they are making a secrecy order recommendation.
2. The attached copy of the application, any copies made therefrom and this form must be returned to the PTO once a recommendation not to impose secrecy has been made or a secrecy order has been rescinded.

Time for Completion of Review:

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